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(Re	equestor's Name)	
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SECRETARY OF STATE
ALLAHASSEE ELONG.

T. HAMPTON
JUL 2 8 2008
EXAMINER

COVER LETTER *

Division of Corp			
SUBJECT: Lion's	Florida Proper	ty Management, L	LC
50 2 02011		ed Liability Company)	
The enclosed Articles of C	Organization and fee(s) are	submitted for filing.	
Please return all correspon	ndence concerning this matt	ter to the following:	
Davieca D	ebbie Singh		
		(Name of Person)	
Lion's Flo	rida Property N	Management, LLC	
		(Firm/Company)	
P O Box 2	2831		
		(Address)	
Orlando, I	FI 32802		
	(Cit	y/State and Zip Code)	
For further information co	oncerning this matter, please	e call:	
Debbie Singh		at (407) 812-730	00
(Name o	f Person)	(Area Code & Daytime Tele	phone Number)
Enclosed is a check for	the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	✓\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
Lion's Florida Property Management, LLC				
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")				
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:				
Principal Office Address: Mailing Address:				
5924 S Orange Ave P O Box 2831				
Orlando, Fl 32809 Orlando, Fl 32802				
The name and the Florida street address of the registered agent are: Parmanand Singh Name 5926 Orange Ave Florida street address (P.O. Box NOT acceptable)				
Orlando, _{FL} 32809				
City, State, and Zip				
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S Registered Agent's Signature (REQUIRED)				

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGR	Davieca Debbie Singh
<u> </u>	
(Use attachment if necessary)	
U. W. Effective data if other than t	the date of filing: (OPTION
LE V: Ellective date, il other dian t	t be specific and cannot be more than five business d

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Davieca Debbie Singh

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

SECRETARY OF STATE